

ISSUE SLIP STAFF AREA (for additional cross references)

POSITION	IN.	ID NO.	DATE
FEE DETERMINATION	SR		2-2-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	LT	51708	8-21-01
RESPONSE FORMALITY REVIEW	MD	615	03-01-02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
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